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SERIAL NUMBER 10/767,694	FILING OR 371(c) DATE 01/29/2004 RULE	CLASS 606	GROUP ART UNIT 3734	ATTORNEY DOCKET NO. HOE-799
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of PCT/EP02/07614 07/09/2002 *yes / no*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 101 38 393 08/04/2001

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

07/07/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	GERMANY	4	15	1
Verified and Acknowledged	<i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials				

## ADDRESS

20028

## TITLE

Medical instrument

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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